

Mr. SMITH of New Jersey. Mr. Speaker, I yield myself such time as I may consume.

I rise today in strong support of House Resolution 1106, acknowledging the month of April as National Autism Awareness Month and supporting research efforts for the causes and treatment of autism, as well as the very special and enormous challenges faced by the parents of autistic children.

As founder and cochair of the Congressional Autism Caucus that I formed along with my good friend and colleague MIKE DOYLE back in 2001, I am very pleased to be here in strong support of this resolution. I would note parenthetically that we have 165 members in our caucus from both sides another aisle. I think with that kind of strength, we have been able to push a lot of new funding, both at NIH and CDC, which is I think appreciated by the community.

Awareness, Mr. Speaker, is in fact a crucial part of our fight, again making this resolution important. The more we inform and educate the general public about autism spectrum disorders, the earlier the medical community can effectively diagnose children with autism and get them the help that they need, and that is important news for the 1.5 million children and adults who currently suffer from autism spectrum disorders and their families.

I would like to first and foremost recognize and commend the parents and the families of individuals with autism for their sacrifice and dedication in providing for the special needs of their children and brothers and sisters with autism.

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They are heroic. I also want to extend heartfelt thanks and appreciation to the teachers, physicians, therapists, and all other advocates who work with such diligence and compassion to support individuals with autism and their families.

Mr. Speaker, when I was first elected back in 1980, the prevalence of autism was estimated to be one out of every 10,000. Just 10 years ago, that number had been changed or updated to be one child in every 500. Today, it is estimated that one in 150 children in the United States will have autism spectrum disorder; and, once diagnosed, early intervention is key to significantly improving the outcome of individuals with this developmental disorder.

Autism, as we know, robs individuals of their ability to communicate and interact with others in society, but early intervention can help those individuals live a more satisfying life. I recognize the success of the worker training programs tailored for Americans with autism. With proper support, training, and early intervention, people with autism can be more productive members of our workforce.

I would like to thank the author of the resolution, Mr. DAVID REICHERT of

Washington, for his leadership in raising autism awareness and commending the efforts of those who care for individuals with autism.

It is important that, in addition to this important awareness resolution, that we move forward in Congress with other important legislation to help those with autism and their families, such as the bill that I have introduced, along with MIKE DOYLE, called the Global Autism Assistance Act. This bill would establish a \$10 million program to fund projects to address autism in the developing world over a period of 3 years. Grants would aim to raise awareness and understanding of autism and to aid service providers in less developed countries. The idea actually came when I was in Lagos in Nigeria and met with some individuals who are caring for autistic children who are absolutely without funds, and yet through love and through expertise they were helping children. But only a small number of kids were getting help in Nigeria, and that is where the idea was formed.

Another critical initiative is a bill that I joined MIKE DOYLE in introducing, called the Expanding the Promise for Individuals with Autism Act, H.R. 1881, which would authorize \$350 million over 5 years to improve access to comprehensive treatment, intervention, and services for individuals with autism and their families, including adults with autism. Among its important provisions, it would create a task force of experts to evaluate current therapies and services, establish several grant programs to assist States to provide services for children and adults with autism, and call for a study of public and private financing of treatments and services.

You hear a lot about the lack of bipartisanship in Washington, DC, these days, Mr. Speaker. In the fight to combat autism, nothing could be further from the truth. Members on both sides of the aisle are united and committed to providing care and services for individuals with autism and the families.

I urge strong support for this resolution.

I yield back the balance of my time.

Mr. WYNN. Mr. Speaker, before I yield the balance of my time, I want to recognize the gentleman and thank him for his leadership on this issue. He has been truly committed. I also again would like to recognize the work of Mr. DOYLE, my colleague, and also my colleague and sponsor, Mr. REICHERT, for his leadership on this issue.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Maryland (Mr. WYNN) that the House suspend the rules and agree to the resolution, H. Res. 1106.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. SMITH of New Jersey. Mr. Speaker, I object to the vote on the

ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

The point of no quorum is considered withdrawn.

SENSE OF CONGRESS REGARDING ESTABLISHMENT OF A BEBE MOORE CAMPBELL NATIONAL MINORITY MENTAL HEALTH AWARENESS MONTH

Mr. WYNN. Mr. Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 134) expressing the sense of the Congress that there should be established a Bebe Moore Campbell National Minority Mental Health Awareness Month to enhance public awareness of mental illness, especially within minority communities, as amended.

The Clerk read the title of the concurrent resolution.

The text of the concurrent resolution is as follows:

H. CON. RES. 134

Whereas mental illness is one of the leading causes of disabilities in the United States, affecting one out of every four families in America and victimizing both those with the illness and those who care for and love those afflicted;

Whereas according to the National Alliance for Mentally Ill (NAMI), the direct and indirect costs to the workplace resulting from mental illness total over \$34,000,000 annually;

Whereas the National Institute of Mental Health has reported that many people suffer from more than one mental disorder at a given time and 45 percent of those with any mental disorder meet criteria for two or more disorders, with severity strongly related to comorbidity (including diabetes, cardiovascular disease, HIV/AIDS, and cancer);

Whereas according to the 1999 Surgeon General's Report on Mental Illness, more than 54,000,000 Americans have a mental disorder in any given year, although fewer than 8,000,000 seek treatment;

Whereas according to the same Surgeon General's Report on Mental Illness, adult Caucasians who suffer from depression or an anxiety disorder are more likely to receive treatment than adult African Americans with the same disorders even though the disorders occur in both groups at about the same rate, when taking into account socioeconomic factors;

Whereas according to a report from the Office of Minority and National Affairs for the American Psychiatric Association, although mental illness impacts all people, African Americans experience a much greater unmet need for mental health services and receive a lesser quality of care, thereby resulting in mental health disparities;

Whereas the three major brain diseases—schizophrenia, bipolar disorder, and depression—adversely affect the economy, contribute to the rise in incarceration rates, and erode the quality of family life of those involved;

Whereas nearly two-thirds of all people with a diagnosable mental illness do not seek mental health treatment due to stigma,

lack of community-based resources, inadequate diagnosis, or no diagnosis;

Whereas communities of color are in need of culturally competent mental health resources and the training of all health care providers to serve multi-ethnic consumers;

Whereas advocacy for traditional mental health organizations must be encouraged to incorporate and integrate minority mental health education and outreach within their respective portfolios;

Whereas other research studies estimate that 50 to 70 percent of all youth in the juvenile justice system have mental health problems that are usually undiagnosed, misdiagnosed, untreated, or badly treated, thus leaving those incarcerated in vulnerable conditions;

Whereas minority mental health consumers often fall into the category of the "working poor", facing additional challenges because they are underinsured or uninsured, which often leads to late diagnosis or no diagnosis of mental illness;

Whereas the faith, customs, values, and traditions of a variety of ethnic groups should be taken into consideration when attempting to treat and diagnose mental illnesses;

Whereas a small percentage of African Americans receive mental health treatment, and a significant percentage refuse treatment or view mental health treatment as the "treatment of last resort", due to the stigma associated with mental illness;

Whereas according to the 1999 Surgeon General's Report on Mental Illness, African Americans are misdiagnosed at a higher rate within the mental health delivery system, and greater effort must be made to accurately assess the mental health of African Americans;

Whereas there is a need to improve public awareness of mental illness and to strengthen local and national awareness of brain diseases in order to assist with advocacy for persons of color with mental illness, so that they may receive adequate and appropriate treatment that will result in their becoming fully functioning members of society;

Whereas community mobilization of resources is needed to educate, advocate for, and train mental health providers to help remove barriers to treatment of mental disorders;

Whereas access to mental health treatment and services is of paramount importance;

Whereas there is a need to encourage primary care physicians to offer screening, partner with mental health providers, and seek the appropriate referral to specialists and to encourage timely and accurate diagnosis;

Whereas the late Bebe Moore Campbell (mother, grandmother, wife, friend, advocate, celebrated writer and journalist, noted author, radio commentator, community activist, co-founder of National Alliance for the Mentally Ill Urban Los Angeles, University of Pittsburgh Trustee and educator, and recipient of numerous awards and honors) was recognized for her tireless advocacy and fight to bring awareness and attention to mental illness among minorities with the release of her New York Times best selling novel, "72 Hour Hold", and her children's book "Sometimes My Mommy Gets Angry", which both bring awareness to the plight of those with brain disorders;

Whereas Bebe Moore Campbell through her dedication and commitment sought to move communities to support mental wellness through effective treatment options, open access to mental health treatment and services, and improve community outreach and support for the many loved ones who are unable to speak for themselves; and

Whereas July would be an appropriate month to recognize as Bebe Moore Campbell National Minority Mental Health Awareness Month: Now, therefore, be it

Resolved by the House of Representatives (the Senate concurring), That it is the sense of Congress that—

(1) improved access to mental health treatment and services and public awareness of mental illness are of paramount importance;

(2) there is an important need for improved access to care, treatment, and services for those diagnosed with severe and persistent mental health disorders and improved public awareness of mental illness; and

(3) an appropriate month should be recognized as Bebe Moore Campbell National Minority Mental Health Awareness Month to enhance public awareness of mental illness and mental illness among minorities.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Maryland (Mr. WYNN) and the gentleman from New Jersey (Mr. SMITH) will each control 20 minutes.

The Chair recognizes the gentleman from Maryland.

GENERAL LEAVE

Mr. WYNN. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on the resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Maryland?

There was no objection.

Mr. WYNN. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, this resolution will designate July as Bebe Moore Campbell National Minority Mental Health Awareness Month.

Mental illness is one of the leading causes of disabilities in the United States affecting one out of every four Americans, and victimizing both those with the illness as well as those who care for and love those afflicted. However, according to a report from the Office of Minority and National Affairs for the American Psychiatric Association, although mental illness impacts all people, African Americans experience a much greater unmet need for mental health services and receive a lesser quality of care, thereby resulting in mental health disparities. Further, according to a Surgeon General's report on mental illness, African Americans who do seek help are misdiagnosed at a higher rate within the mental health delivery system.

Communities of color are in need of culturally competent mental health providers and expanding training for all health care providers to serve multiethnic consumers in order to accurately assess and treat African Americans and other minority patients.

According to the National Institute of Mental Health, one out of every three African Americans are more likely to stop treatment early, and are less likely to receive followup due to a lack of insurance coverage. Without adequate health insurance, mental health cannot be properly treated. Unfortu-

nately, only a small percentage of African Americans receive mental health treatment, and a significant percentage refuse treatment or view mental health treatment as a treatment of last resort due to a stigma associated with mental illness.

To address these problems, obviously we need more resources and access to health insurance. But critically we also need to improve public awareness and encourage minority citizens to confront the illness instead of denying it or being ashamed of its existence in their families and communities.

This bill will, number one, raise awareness about mental illness and mental health disparities among minorities nationwide. Second, it will encourage training for health care providers to ensure proper diagnosis of African American patients and minority communities. And, third, it will improve public health by encouraging the expansion of vital mental health care into underserved communities in every State.

Let me take a moment and tell you about Bebe Moore Campbell. Bebe Moore Campbell was a renowned African American author who died on November 27, 2006, at the age of 56. She was also my college classmate at the University of Pittsburgh. Through her dedication and commitment, Ms. Campbell sought to remove the stigma of mental illness in the African American community. Her novel, "72 Hour Hold," and her children's book, "Sometimes My Mommy Gets Angry," both bring to light the plight of those with brain disorders. Her goal was to move communities to support mental wellness through effective treatment, increased resources, access to mental health services, and improved community outreach and support.

July would be an appropriate month to be designated as Bebe Moore Campbell National Minority Mental Health Awareness Month, since our first book, "72 Hour Hold," which addressed minority mental health was released to the public in July of 2005.

I want to thank my lead cosponsor, Congresswoman DIANE WATSON, as well as all the cosponsors of this bill for their support, and I urge all of my colleagues to support this very important legislation.

I reserve the balance of my time.

Mr. SMITH of New Jersey. Mr. Speaker, I yield myself such time as I may consume.

Let me begin by thanking my good friend and colleague, Mr. WYNN, for authoring this very important resolution. I rise today in strong support of it, recognizing May as the Bebe Moore Campbell National Minority Health Awareness Month. Bebe Moore Campbell will be remembered as a celebrated writer and journalist whose New York Times best selling novel, "72 Hour Hold," challenged minority communities to be open with their mental health and lower the stigma associated with receiving therapy. Her ability to assess

the mental health delivery system from a minority vantage point has helped raise awareness and remove barriers.

Mental illness, Mr. Speaker, can be crippling, not only to the individuals suffering from this disease, but obviously also the family and friends of that person. In some cases, therapy is declined or refused because mental health care is seen as the treatment of last resort. But we must improve public awareness and erase the stigma that is so often associated with mental illness.

Again, I would like to thank my friend and colleague, the author of the resolution, Mr. WYNN of Maryland, for raising public awareness of mental illness in minority communities and the importance of getting proper mental health treatment to those and for those who have been diagnosed. I encourage all of my colleagues to vote in favor of the resolution.

I reserve the balance of my time.

Mr. WYNN. Mr. Speaker, it is a great pleasure to me that this bill is met with such bipartisan support. I particularly want to thank my colleague, Mr. SMITH, for his support. He is recognized throughout this institution as a champion for the wellness of our citizens, human rights, and for supporting causes which make our country better. I want to thank him again for his support and thank all the cosponsors.

I yield back the balance of my time.

Mr. SMITH of New Jersey. I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Maryland (Mr. WYNN) that the House suspend the rules and agree to the concurrent resolution, H. Con. Res. 134, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. SMITH of New Jersey. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

The point of no quorum is considered withdrawn.

SENSE OF HOUSE REGARDING ESTABLISHMENT OF A NATIONAL BRAIN TUMOR AWARENESS MONTH

Ms. SCHAKOWSKY. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 1124) expressing the sense of the House of Representatives that there should be established a National Brain Tumor Awareness Month, and for other purposes, as amended.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 1124

Whereas brain tumors are the leading cause of death from solid tumors in children under the age of 20, and are the third leading cause of death from cancer in young adults ages 20–39;

Whereas more than 190,000 people in the United States are diagnosed with a brain tumor each year;

Whereas of these tumors, approximately 40,000 are new cases of primary brain tumors and approximately 150,000 are metastatic brain tumors, where a cancer spread from another part of the body to the brain;

Whereas some 10–15 percent of all persons with cancer will experience a metastatic brain tumor at some point;

Whereas brain tumors may be either malignant or benign, but can be life-threatening in either case;

Whereas treatment of brain tumors is complicated by the more than 120 different types of such tumors;

Whereas national priorities for dealing with brain tumors include—

(1) supporting research programs at the National Cancer Institute;

(2) strengthening brain tumor research program leadership at the National Institutes of Health, including the National Cancer Institute; and

(3) strengthening access to critical healthcare services for Medicare beneficiaries;

Whereas the North American Brain Tumor Coalition established a Brain Tumor Action Week during the first week of May 2007 and each subsequent first week in May;

Whereas the Lori Arquilla Andersen Foundation is recognized for their efforts to promote awareness of the life-threatening effects of brain tumors, to advocate on behalf of brain tumor patients, and to raise funds for medical research;

Whereas Accelerate Brain Cancer Cure is recognized for their work to bring more treatments to patients, stimulate research and development and otherwise support the accelerated development of new therapies for brain cancer;

Whereas the Goldhirsh Foundation is recognized for being devoted to providing support for innovative brain tumor research with grants awarded through The Brain Tumor Research Awards Program and The Brain Tumor Funders Collaborative;

Whereas the American Brain Tumor Association is recognized for their work to eliminate brain tumors through research and to meet the needs of brain tumor patients and their families;

Whereas The Brain Tumor Society is recognized for their work to find a cure for brain tumors, improve the quality of life for brain tumor patients, survivors, and their families, and raise funds to advance research projects that enhance treatments and find a cure;

Whereas the National Brain Tumor Foundation is recognized for their work to find a cure for brain tumors, and for giving hope to the brain tumor community by funding meaningful research and providing resources and education to patients;

Whereas the Tug McGraw Foundation is recognized for their work to support research that will improve the quality of life in the physical, social, spiritual, and cognitive areas of patients dealing with brain cancer;

Whereas the Childhood Brain Tumor Foundation is recognized for their work to strive to serve the needs of families and children with brain tumors in hopes of improving the quality of life and finding cures for pediatric brain tumors through funding basic science or clinical research;

Whereas the Children's Brain Tumor Foundation is recognized for their work to improve the treatment, quality of life, and the long term outlook for children with brain and spinal cord tumors through research, support, education, and advocacy to families and survivors;

Whereas the Pediatric Brain Tumor Foundation is recognized for their work to eradicate brain tumors, providing support for families, and increasing public awareness about the severity and prevalence of childhood brain tumors;

Whereas the Southeastern Brain Tumor foundation is recognized for their work to instill hope, knowledge and comfort by offering information, education, and support services to all affected by brain tumors;

Whereas the Oklahoma Brain Tumor Foundation is recognized for their work in meeting the needs of Oklahoma families, caregivers and patients affected by brain tumors, through education, advocacy, research and service;

Whereas the Michael Quinlan Brain Tumor Foundation is recognized for their work to support those affected by brain tumors through educational, emotional, financial, and spiritual services;

Whereas the Brain Tumor Action Network is recognized for their work to bring awareness to the general public about brain tumors and to educate and empower brain tumor survivors, their families and friends;

Whereas May would be an appropriate month to recognize as National Brain Tumor Awareness Month; and

Whereas there is a need for greater awareness of brain tumors and brain cancer on the part of the public, including awareness of symptoms and warning signs, treatment options, research needs, and public policy implications: Now, therefore, be it

Resolved, That—

(1) it is the sense of the House of Representatives that there should be established a National Brain Tumor Awareness Month; and

(2) the House of Representatives applauds the actions of medical professionals and other caregivers, researchers, patients and their families, and others who strive to combat and raise public awareness of brain tumors and brain cancer.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Illinois (Ms. SCHAKOWSKY) and the gentleman from New Jersey (Mr. SMITH) each will control 20 minutes.

The Chair recognizes the gentlewoman from Illinois.

GENERAL LEAVE

Ms. SCHAKOWSKY. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and to include extraneous material on the resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Illinois?

There was no objection.

Ms. SCHAKOWSKY. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I want to express my gratitude to Chairman DINGELL for his support in bringing this resolution to the floor today. I want to also thank Congressman ROSKAM for his support and cosponsorship of this resolution.

For me, the heart and soul behind the effort to establish a Brain Tumor